FOOD COMPONED OUI 93

To: Qualification/Tax Division of Corpo			·		٠
·					
SUBJECT: EdSolut:	ions, Inc (Name of c	corporation - n	ust include suffix)		
Dear Sir or Madam:	789-00/44	-			
The enclosed "Application	by Foreign Corporation for a register the above referenced	Authorization	to Transact Business in		ate of Existence",
Please return all correspon	dence concerning this matter	r to the followi	ng:		
	Betty Lou Burnet	.t		٠	V 2016
		(Name of Pe	,	W	0509
	EdSolutions, Inc	<u>:</u>		''000034; ''18/ 17/	271908
	,	(Firm/Com	pany)	- 10.1 177 ※※米米米?	JU01036001 0.00 *****70.00
	131 Belle Forest	Cirlce,	Suite 210		
		(Addres		-	
	Nashville, TN 3	7221 -			
	,	(City/State	Zip)		·
Should you need to call so	meone concerning this matter	r, please call:			
Betty Lou Burne	ett a	_t 615-673	-6917		
	of Person)	-	ode & Daytime Teleph	one Number)	
STREET ADDRESS: Qualification/Tax Lien Sec	otion.		MAILING ADDRE		SEGRETA DIVISION OF
Division of Corporations 409 E. Gaines St.	-	. =	Qualification/Tax Lie Division of Corporat P.O. Box 6327		S PM
Tallahassee, FL 32399		-	Tallahassee, FL 3231	4	U SF STATE SPORAT
Enclosed is a check for the	e following amount:				TE SHOTT
X \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Certifie	Filing Fee & d Copy	\$87.50 Filing F Certificate of St Certified Copy	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 20, 2000

BETTY LOU BURNETT EDSOLUTIONS, INC. 131 BELLE FOREST CIRCLE, SUITE 210 NASHVILLE. TN 37221

SUBJECT: EDSOLUTIONS, INC. Ref. Number: W00000025384

We have received your document for EDSOLUTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Letter Number: 300A00055047

Michelle Hodges Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

l.		ions, Inc poration; must include the word "INCORPORAT	FD" "COMP	ANY" "CORPORATION" or words or	
	abbreviations	s of like import in language as will clearly indicated finot so contained in the name at present.)			
2.		DELAMARE country under the law of which it is incorporated)	3	62-1800604 (FEI number, if applicable)	
	(State or c	country under the law of which it is incorporated)		(FEI number, if applicable)	
4.		10/13/99 (Date of incorporation)	5	Perpetual ion: Year corp. will cease to exist or "pe	
	1 :		(Durati	ion: Year corp. will cease to exist or "pe	rpetual")
6.	<u>U</u>	Date first transacted business in Florida.) (SEE S	ECTIONS 607	7.1501, 607.1502 and 817.155, F.S.)	
7.		le Forest Circle, Suite 210		_	
		le, TN 37221			
	Nashvii		ling address)		
	Educati	onal Services		_	
δ.	. <u>Educati</u>	onal Services (Purpose(s) of corporation authorized in home sta	te or country t	to be carried out in state of Florida)	-
9.	. Name and st	treet address of Florida registered agent: (P.O.)	Box or Mail D	Prop Box NOT acceptable)	SEORE
	Name:	NRAI Services, Inc		<u>၊</u> မ	0.5 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4 1.4
Off	ice Address:	526 E. Park Ave			2895 2995 2005
		Tallahassee	, Florida,	32301 (Zip code)	RATIO
				(Zip code)	5
10.	Registered a	gent's acceptance:			
n t	this application the property with the property with the property of the prope	ned as registered agent and to accept service of p n, I hereby accept the appointment as registered provisions of all statutes relative to the proper a bligations of my position as registered agent.	agent and ag	ree to act in this capacity. I further ag	ree to
	-	× NWCA	h	<u> </u>	. 4.
		(Registered age	nt's signature	:)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

Margaret Mary Wilson, Pres 131 Belle Forest Cr, Ste 210 Nashville, TN 3722

Betty Lou Burnett, Sec 131 Belle Forest Cr, Ste 210 Nashville, TN 3722

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)
	Margaret Mary Wisim
Address:	131 Belle Forest Circle, Suite 210
	Nashuille IN 3722,
Vice Chair	man: Rim Packard
Address:	844 Moraga Dr.
	Los Angeles CA 90049
Director:	Hal Kaplan
Address:	1310 Lewisville - Clemmons Rd.
	Lewisville, NC 27023
Director:	Tom Kalinske
	3351 El Camino Real Suite 200
	Menlo Park, CA 94027
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)
President:	Margaret Mary Wilson
	131 Belle Forest Circle, Suite 210
	Nashville, TN 37221
Vice Presid	lent:
Address:	
Secretary:	Betty Lou Burnett
-	131 Belle Forest Circle, Suite 210
	Nashville, TN 37221
Treasurer:	
Address:	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
13 \(\sqrt{13} \)	Bull P. B.
\\\	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. 📈	Petty Lou Bur nett (Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State PAGE

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EDSOLUTIONS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2000.

Edward J. Freel, Secretary of State

3110469 8300 AUTHENTICATION: 0704167

001485180 DATE: 09-28-00